**Pharmacy** 

May 2007 • Bulletin 654

# Special Update

## Medi-Cal Transitions to CMS-1500 Form and NPI

This bulletin contains provider manual updates based on Medi-Cal's acceptance of the new *CMS-1500* form and advancement to use of the National Provider Identifier (NPI).

### **CMS-1500 Transition**

From April 23, 2007 to June 24, 2007, Medi-Cal will accept both the *HCFA 1500* and *CMS-1500* form. During this transition period, providers are encouraged to migrate their business processes away from the *HCFA 1500*, depleting their form stock, in preparation for exclusive use of the *CMS-1500*.

Providers may continue to use the *HCFA 1500* form during the transition period and bill as they do currently. Providers using the *HCFA 1500*, however, can only enter their Medi-Cal provider number.

Providers may choose to fully transition to the new *CMS-1500* claim form at any time during this two-month period before the use of the *CMS-1500* becomes mandatory. Beginning June 25, 2007, Medi-Cal will only accept the new *CMS-1500*.

Also, beginning May 23, 2007, the NPI, if available, should be reported along with the Medi-Cal provider number, but is not necessary for proper adjudication. The Medi-Cal provider number must be reported on all claims through November 25, 2007. Claims received with only an NPI will not be processed.

### 30-1, 30-4 Transition

When billing on the *Pharmacy Claim Form* (30-1) or *Compound Drug Pharmacy Claim Form* (30-4), pharmacy providers should continue to use a Medi-Cal provider number until November 26, 2007. Beginning November 26, 2007, providers must use an NPI.

Updated 30-1 and 30-4 claim forms with space for a 10-digit NPI will be available July 1, 2007. Providers are encouraged to use old stock prior to using new 30-1 and 30-4 claim forms. To order more claim forms, call the Telephone Service Center (TSC) at 1-800-541-5555.

\*\* Special inserts explaining how to enter provider identifiers during the dual-use period are included with this mailing. Please place them in your provider manual, according to the instructions on the Remove and Replace page, to help with billing during this period.

PH 1

# **Instructions for Manual Replacement Pages**May 2007

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**Part 1 Provider Manual** 

Remove and replace at the end of *Manual* 

Ordering section: Subscriber Order Form 1/2

Remove and replace: claim sub 1 thru 4

cmc enroll 5/6 elect 1/2 mcp spec 7/8

Remove: medicare 11 thru 15 Insert: medicare 11 thru 13

Remove and replace: other 5/6

point 1/2

Medi-Cal Point of Service (POS) Network/Internet

Agreement 1/2 prog 1/2, 5/6 prov rel 5/6

**Part 2 Provider Manual** 

Insert at front

of manual: NPI dual-use insert

Remove: Contents for Pharmacy Billing

and Policy i thru vi

Insert: Contents for Pharmacy Billing

and Policy i thru vii

Remove and replace: blood 1/2, 7 thru 9

cal child bil 1/2 CCS Program Billing Guidelines 1/2

Remove: cal child bil hcf 1 thru 3

Insert: cal child bil cms 1 thru 3 (new)

Remove and replace: cal child panel 1 thru 4

cal child sar 1 thru 6

children 1/2

Insert after

the CIF Submission and Timeliness

Instructions section: NPI dual-use insert

cms comp 1 thru 23 (new) cms spec 1 thru 8 (new) cms sub 1 thru 6 (new) cms tips 1 thru 4 (new)

Remove and replace: compound comp 1/2

Remove and replace: dura 1/2, 5 thru 8, 11/12

dura bil dme 5/6 dura bil thp 1/2 dura ex 1 thru 18 forms leg 3/4 genetic 3 thru 8

Remove: hcfa comp 1 thru 24

HIPAA In Review 1

Code Correlation Guide 1/2

hcfa spec 1 thru 9 hcfa sub 1 thru 6 hcfa tips 1 thru 4

Remove and replace: incont sup com 3 thru 6

Remove: inject 1 thru 6, 13/14, 53/54, 59

Insert: inject 1 thru 6, 13/14, 53/54,

59/60

Remove and replace: iv sol admin 1

mc sup ex 1 thru 9 mc sup man cd 1/2

Insert in front of Medicare/Medi-Cal Crossover Claims: Pharmacy Services

section: NPI dual-use insert

Remove and replace: medi cr ph 1 thru 10, 15 thru

22

medi cr ph ex 1 thru 17 medi cr ph pr 1 thru 14 medi non hcp 1 thru 3

ortho 5/6 ortho ex 1 thru 7 presum 19/20 remit pay 1/2 subacut lev 1 thru 4